NH DEPARTMENT OF CORRECTIONS POLICY AND PROCEDURE DIRECTIVE			CHAPTER Health Services STATEMENT NUMBER 6.51		
SUBJECT:	HUNGER STRIKE/HEAL' MANAGEMENT	ТН	EFFECTIVE DATE	01/01/06	
			REVIEW DATE	09/15/07	
PROPONENT:	Robert MacLeod, Administra Name/Title	ative Dir.	SUPERSEDES PPD#	6.51	
	Medical/Forensic Services  Office	271-3707 Phone #	DATED	04/15/04	
ISSUING OFFICER:			DIRECTOR'S INITIAI	_S	
			DATE		
			APPENDIX ATTACH	ED:	
William Wrenn, Commissioner		YES N	O		

#### I. <u>PURPOSE</u>:

To provide for consistent management and health monitoring of an inmate on a hunger strike.

#### II. APPLICABILITY:

To all staff

## III. POLICY:

It is the policy of the Department of Corrections that:

- A. Those individual inmates who refuse to eat will be monitored for changes in health status with physician ordered medical interventions as clinically indicated.
- B. In life-threatening cases, the Court will be petitioned for approval to force feed those in danger of death as a result of refusal to eat.
- C. Mass hunger strikes will be managed both as an overall security management concern and a health status concern.

#### IV. PROCEDURE:

#### A. Individual Hunger Strike

### 1. Security:

When an inmate has made a clear statement not to eat or has been observed not to have eaten food for six (6) meals, security staff will:

- a. Initiate the hunger strike log (attachment 1)
- b. Complete an incident report;
- c. Notify the Health Services on-duty nurse;
- d. Notify the Warden;
- e. Notify the Investigations Unit.

#### 2. Nursing:

Upon notification, nursing staff will:

- a. Initiate a Refusal to Eat flowsheet;
- b. Notify the on- call physician/Chief Medical Officer by the next MD duty day or as clinically indicated;
- c. Complete a health status baseline;

- d. Assess daily with interventions as clinically indicated; and
- e. Admit as clinically indicated to Health Services inpatient for continued observation and evaluation by the physician.

#### 3. Medical

Upon notification, the Physician will:

- a. Review the health record for current health concerns and health status impact of refusal to eat:
- b. Write for a dietary consult.
- c. Prescribe medical treatment as indicated;
- d. Review the Refusal to Eat flowsheet every three (3) days or as clinically requested/indicated;
- e. Determine when to admit to a health services inpatient center for more intense observation, monitoring, and/or treatment;
- f. Notify the Administrative Director of progress or changes;
- g. Determine when refusal to eat has become life-threatening and consult with the Administrative Director and DOC legal counsel regarding Court petition to force feed.

## B. <u>Mass Hunger Strike</u>

When a group or mass hunger strike occurs, an operational team representing Security, Health, and Administration will be organized for the safe management of both the individuals involved in the hunger strike and the rest of the prison population.

#### REFERENCES:

Standards for the Administration of Correctional Agencies Second Edition. Standards

Standards for Adult Correctional Institutions

Fourth Edition Standards

4-4224

Standards for Adult Community Residential Services

Fourth Edition. Standards

Standards for Adult Probation and Parole Field Services

Third Edition. Standards

Other

MACLEOD/pf

Attachment

# NEW HAMPSHIRE DEPARTMENT OF CORRECTIONS HUNGER STRIKE LOG

INMA	TE NAME	I.D	
D.O.B	<b>-</b>	HOUSING SITE	
NOTII	FICATIONS:		
1.	WARDEN:	DATE:	TIME:
2.	NURSE:	NAME:	
3.	INCIDENT FO	ORM COMPLETED: DATE:	TIME:

DATE	WEIGHT	BREAK- FAST	LUNCH	DINNER	FLUID INTAKE	C.O. INITIALS
		Y/N	Y/N	Y/N	Y/N	
		Y/N	Y/N	Y/N	Y/N	
		Y/N	Y/N	Y/N	Y/N	
		Y/N	Y/N	Y/N	Y/N	
		Y/N	Y/N	Y/N	Y/N	